PTO/SB/32 (04-09)
Approved for use through 05/31/2009. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE ss it displays a valid OMB of REQUEST FOR ORAL HEARING Docket Number (Optional) BEFORE LF 227 THE BOARD OF PATENT APPEALS AND INTERFERENCES In re Application of Michael R. Hynes Application Number 10/811,258 March 26, 2004 Calibrated Pushrod for Injection Volume Control in Prefilled Syringes Art Unit Examiner Flizabeth Rose Moulton 3767 Applicant hereby requests an oral hearing before the Board of Patent Appeals and Interferences in the appeal of the above-identified application. The fee for this Request for Oral Hearing is (37 CFR 41.20(b)(3)) \$ 1.080.00 Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: X A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet. The Director is hereby authorized to charge any fees which may be required, or credit any overpayment 23-3000 to Deposit Account No. A petition for an extension of time under 37 CFR 1.136(b) (PTO/SB/23) is enclosed. For extensions of time in reexamination proceedings, see 37 CFR 1,550. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. I am the applicant/inventor. / Thomas W. Humphrey / Signature assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. Thomas W. Humphrey (Form PTO/SB/96) Typed or printed name x attorney or agent of record. June 30, 2009 Date Registration number 34.353 attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. (513) 241-2324 Telephone number NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. *Total of __ forms are submitted.

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being transmitted via the Office electronic filling system in accordance with § 1.6(a)(4). Dated: June 30, 2009 Signature: / Thomas W. Humphrey / (Thomas W. Humphrey)